



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 201297	DATE OF INSPECTION 02-08-2013
LOCATION OF INSTRUMENT (STREET AND CITY) 211 WEST BROADWAY WEBB CITY, MISSOURI 64870	TIME OF INSPECTION 22:06

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 49.0°C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS OK	
<input checked="" type="checkbox"/> TIME AND DATE OK	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE ($34^{\circ}\text{C} \pm 0.2^{\circ}\text{C}$) 34.0	

CALIBRATION CHECK -

Run three tests using a standard solution. All three tests must be within $\pm 5\%$ of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

- 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE
(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) (0.10 Ethanol in vapor concentration)

TEST 1 .100	TEST 2 .100	TEST 3 .101
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PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS	1	(0-.04)	0	(.05-.09)	0	(.10-.14)	2	(.15-.19)	3	(Over .19)	0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

INSTRUMENT IS WITHIN D.O.H AND SENIOR SERVICES SPECIFICATIONS!

MANUFACTURER: Guth LAB LOT / BATCH #: 12100 DATE EXPIRED: 07-18-2014

INSPECTING OFFICER

SIGNATURE

Gregory S. Pachlhoran

TYPE II PERMIT NUMBER/EXPIRATION DATE

AG-17-2014

PRINT NAME

Gregory S. Pachlhoran

TELEPHONE NUMBER

(417) 673-1911



GUTH LABORATORIES, INC.
690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-654-6170

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 12100 of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on July 20, 2012, using a Perkin Elmer Gas Chromatograph
Autosystem XL S/N: 610N9030209, and found to contain 0.1217% (w/vol)
ethyl alcohol. The expiration date for this lot
number is July 18, 2014 at 11:59 PM.

When used in a calibrated Simulator, operating at
34°C +/- .2°C, this solution will give a breath alcohol
analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were
free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose
values are traceable to NIST.
All balances are calibrated annually by an outside agency using NIST traceable weights.
Calibration verification is done prior to each use utilizing NIST traceable weights.

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
WEBB CITY POLICE DEPARTMENT
BAC DATAMASTER SERIAL NUMBER 201297
02/08/13 21:57

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS: SAMPLE CHAMBER: 49C

FLOW DETECTOR: OKAY

PUMP: HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

! "#\$%&'^<>,-./0123456789!`<=>?ABCDEF0
HIJKLMNOPQRSTUVWXYZ\J`_`abcede^ghijklmn
opqrstuvwxyz\J`_`

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
WEBB CITY POLICE DEPARTMENT
BAC DATAMASTER SERIAL NUMBER 201297
02/08/13

TESTING OFFICER:

PACHLHOFER/GREGORY/S

OFFICER I.D.: 426

PERMIT NUMBER: 200296

EXPIRATION DATE: 09/17/14

MISCELLANEOUS DATA:

MONTHLY TEST

--- SUPERVISOR MODE ---

FLOW DETECTOR: OKAY

PUMP: INTERNAL STANDARD: .000

EXTERNAL STANDARD: .100

BLANK TEST: .000

EXTERNAL STANDARD: .100

BLANK TEST: .000

EXTERNAL STANDARD: .101

BLANK TEST: .000
INTERNAL STANDARD: VERIFIED 22:00
EXTERNAL STANDARD: .100 22:01
BLANK TEST: .000 22:01
EXTERNAL STANDARD: .100 22:02
BLANK TEST: .000 22:02
EXTERNAL STANDARD: .101 22:03
BLANK TEST: .000 22:03

TESTING OFFICER:

PACHLHOFER/GREGORY/S

OFFICER I.D.: 426

PERMIT NUMBER: 200296

EXPIRATION DATE: 09/17/14

MISCELLANEOUS DATA:

ABORT TEST

TESTING OFFICER:

PACHLHOFER/GREGORY/S

OFFICER I.D.: 426

PERMIT NUMBER: 200296

EXPIRATION DATE: 09/17/14

MISCELLANEOUS DATA:

ABORT TEST

--- BREATH ANALYSIS ---

BLANK TEST: .000
INTERNAL STANDARD: VERIFIED 22:00
RADIO INTERFERENCE

Operator Signature My g. Pachlhofer 426 or Operator Signature My g. Pachlhofer 426 or Signature My g. Pachlhofer 426

2208-02

2208-02

or Signature My g. Pachlhofer 426

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



GREGORY S PACHLHOFER

Is hereby authorized to instruct and supervise operators, train Instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 09/17/2012

Director of State Public Health Laboratory

Number 220290

Margaret T. Donnelly
Director, Department of Health

Expires 09/17/2014

Lab. 4 (R7-88)

MO 580-0771 (7-88)